

Escalation Procedure

Please follow the listed order of contact to receive the best possible service from NOI ***Please note Customer Service Number 1-877-663-8663***

Level 1-Notification to NOC by phone, fax or e-mail+ 1-877663-8663 Prompt 1, extension 1418 FAX 407-679-7553 noc@netoneint.com

Level 2-(after 24 hrs)-Notification to NOC Manager 1-407-384-4200 prompt 1, extension 1619, or conniegonzalez@netoneint.com

Level 3-(after 24 hrs)-Notification to Vice President for Executive Escalation 1-407-384-4200 prompt 1, extension 1650 hbrydges@netoneint.com



Disaster RecoveryProcess 4/28/03 revised

Example of Ticket: Date:	CRS Name:			Time:	am/pm	
Domestic Trouble	_ Calling Card	l Trouble	Intl' Tro	ouble		
Country Code:	Country: _					
Spanish I	English	Other	Who	leSale:		
Call example must be within the last 24 hours in order to process!						
Customer Name:		Telephone #: _		Cell? (Y or N)		
**Verify PIC to 444	4 (In Ucommo	and) Yes	No	If No, have c	customer perform	ı the 700 test.
Last usage date:	Billing Status		Date of call_	Time	of call	
Term call Example:						
Describe the Calling Problem: Transmission 1WA=One Way Audio (describe above) CLG=Clipped or Garbled speech CO=Cut Off EC=Echo LV=Low Volume NH=Noise or Hum ST= Static		DA: FB: LPI RC	Connection			
If customer received a recording, what was the message/code:						
NOC to fill in inform Trace call through Sw. If no, Customer may h If duplicated the issue: Test the current route (Connected	itch: Yes ave misdial Ve (Dial same dia dial by direct t Did 1	erify PIC. aled # on gr runk selecti not connect	reen test phor Yes ion – black p	No phone) 		
<i>NOTE: If test fails the</i> <i>CRS call the customer</i> Report Trouble to Fail	r and advise r	etest. If cor	nnected verij	U U	CR. If test calls co	omplete, have
Carrier Representative Original route: Code: 1St Routing change:	2 nd	3 rd		icket #		
Code: 1St	2 nd NOC A	3 rd Associate co	ompleted by	:		



Disaster RecoveryProcess 4/28/03 revised